

CLAIMS ONLY							SERIAL NO. _____		FILING DATE _____		
							APPLICANT(S) _____				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/						51				
2		/					52				
3		/					53				
4		/					54				
5		/					55				
6		/					56				
7		/					57				
8		/					58				
9		/					59				
10	/						60				
11	/						61				
12	/						62				
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42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	4	↓		↓		↓	TOTAL IND.		↓		↓
TOTAL DEP.	8	←		←		←	TOTAL DEP.		←		←
TOTAL CLAIMS	12						TOTAL CLAIMS				

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS